Konocti Unified School District
Overage Worksheet

Name of Certificated Employee: _____

Month Reporting:_____

Grade Level or Section: _____
(if more than one section please indicate on the chart below)

School Site:_____

Day of the month	Period 1 # of students	Period 2 # of students	Period 3 # of students	Period 4 # of students	Period 5 # of students	Period 6 # of students	Period 7 # of students

Administrator's Signature _____

Employee's Signature _____

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Account Code_____

Units _____ Rate_____ Gross _____